

MONTHLY FINANCIAL REPORT FOR CORPORATE OR PARTNERSHIP DEBTOR

Case No. 20-42348-BDL Report Month/Year November 2020
 Debtor Shilo Inn, Ocean Shores, LLC

INSTRUCTIONS: The debtor's monthly financial report shall include a cover sheet signed by the debtor and all UST forms and supporting documents. Exceptions, if allowed, are noted in the checklist below. Failure to comply with the reporting requirements of Local Bankruptcy Rule, or the United States Trustee's reporting requirements, is cause for conversion or dismissal of the case.

The debtor has provided the following with this monthly financial report:		Yes	No
UST-12	Comparative Balance Sheet <u>or</u> debtor's balance sheet. The debtor's balance sheet, if used, shall include a breakdown of pre- and post-petition liabilities. The breakdown may be provided as a separate attachment to the debtor's balance sheet.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-13	Comparative Income Statement <u>or</u> debtor's income statement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-14	Summary of Deposits and Disbursements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-14 Continuation Sheets	Statement(s) of Cash Receipts and Disbursements A Continuation Sheet shall be completed for each bank account or other source of debtor funds and shall include a monthly bank statement and all supporting documents described in the instructions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-15	Statement of Aged Receivables A detailed accounting of aged receivables shall be provided on, or in an attachment to, UST-15.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-16	Statement of Aged Post-Petition Payables A detailed accounting of aged post-petition payables shall be provided on, or in an attachment to, UST-16.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UST-17	Other Information When applicable, attach supporting documents such as an escrow statement for the sale of real property or an auctioneer's report for property sold at auction. When changes or renewals of insurance occur, attach a copy of the new certificate of insurance or a copy of the bond.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CONTACT INFORMATION

Who is the best person to contact if the UST has questions about this report?

Name Larry Chank, CEO
 Telephone 1-760-702-4085
 Email larry.chank@shiloinns.com

Debtor

Shilo Inn, Ocean Shores, LLC

Case Number

20-42348-BDL

Month Ending

November 2020

DEBTOR'S CERTIFICATION

INSTRUCTIONS: The debtor, or trustee, if appointed, must answer questions 1 and 2 and sign this financial report where indicated below. Only an officer or director has authority to sign a financial report for a corporate debtor and only a general partner has authority to sign a financial report for a partnership debtor. Debtor's counsel may not sign a financial report for the debtor.

Question 1 At month end, was the debtor delinquent on any post-petition tax obligation?

Yes ☐ No ☒

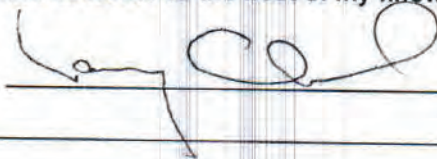
If yes, list each delinquent post-petition tax obligation on page 9.

Question 2 For purposes of calculating the debtor's obligation under 28 U.S.C. 1930(a)(6) to pay a quarterly fee to the United States Trustee, **TOTAL DISBURSEMENTS** this month from all sources were:

Complete page 6 to calculate **TOTAL DISBURSEMENTS** and enter the total here.

\$ 85,744.04

I certify under penalty of perjury that other information contained in this monthly financial report is complete, true, and accurate to the best of my knowledge, information, and belief.

Debtor's
signature

Date

12/15/20

UST-12, COMPARATIVE BALANCE SHEET
--

As of month ending			
ASSETS			
Current Assets			
Cash			
Cash - Held by Others (Escrow & Attorney Trust Accounts)			
Accounts Receivable (net)			
Notes Receivable			
Inventory			
Prepaid Expenses			
Other (attach list)			
Total Current Assets			
Fixed Assets			
Real Property/Buildings			
Equipment			
Accumulated Depreciation			
Total Fixed Assets			
Other Assets (attach list)			
TOTAL ASSETS			
LIABILITIES			
Post-Petition Liabilities			
Taxes Payable			
Other Accounts Payables			
Notes Payable			
Rents, Leases & Mortgages Payable			
Accrued Interest			
Other (specify)			
Total Post-Petition Liabilities			

(cont'd. on next page)

UST-12, COMPARATIVE BALANCE SHEET (contd.)

As of month ending			
Pre-Petition Liabilities			
Unsecured Debt			
Priority Debt:			
Taxes			
Wages			
Deposits			
Other			
Notes Payable (Secured Debt)			
Total Pre-Petition Liabilities			
TOTAL LIABILITIES			
EQUITY			
Stockholders' Equity (Or Deficit)			
Capital Stock			
Paid-In Capital			
Retained Earnings			
Total Stockholder's Equity (Or Deficit)			
Partner's Investment (Or Deficit)			
TOTAL LIABILITIES AND STOCKHOLDERS EQUITY OR PARTNERS INVESTMENT			

Footnotes to balance sheet:

See attached report

SHILO INN, OCEAN SHORES, LLC
BOOK VALUE (INCOME TAX BASIS) AND MARKET VALUE
BALANCE SHEET
PERIOD ENDING 11/30/2020

ASSETS	BOOK VALUE	MARKET VALUE
CURRENT ASSETS		
TOTAL CASH	\$388,012	\$388,012
PREPAID EXPENSES	\$22,304	\$22,304
ACCOUNTS RECEIVABLE	\$6,224	\$6,224
TOTAL CURRENT ASSETS	<u>\$416,540</u>	<u>\$416,540</u>
FIXED ASSETS		
LAND	\$861,648	
LAND IMPROVEMENTS	\$1,640,808	
BUILDING	\$10,571,550	
FURNITURE	\$174,404	
FIXTURES & EQUIPMENT	\$431,799	
RESTAURANT EQUIPMENT	\$49,958	
SIGNS	\$131,990	
TOTAL GROSS FIXED ASSETS	<u>\$13,862,157</u>	
ACCUMULATED DEPR & AMORT	<u>-\$9,248,054</u>	
NET FIXED ASSETS	<u>\$4,614,103</u>	<u>\$15,000,000</u>
OTHER ASSETS		
LOAN FEES	\$82,316	\$82,316
LINENS	\$9,141	\$9,141
OTHER DEPOSITS / OTHER ASSETS	\$12,000	\$12,000
SUSPENSE	\$22,425	\$22,425
TOTAL OTHER ASSETS	<u>\$125,882</u>	<u>\$125,882</u>
TOTAL ASSETS	<u><u>\$5,156,525</u></u>	<u><u>\$15,542,422</u></u>
LIABILITIES AND EQUITY		
CURRENT LIABILITIES		
PRE-PETITION TRADE PAYABLES	\$232,835	\$232,835
POST-PETITION TRADE PAYABLES	\$62,049	\$62,049
TOTAL ACCRUED EXPENSES	\$246,981	\$246,981
TOTAL CURRENT LIABILITIES	<u>\$541,865</u>	<u>\$541,865</u>
LONG TERM LIABILITIES		
NOTE PAYABLE MORTGAGE WELLS FARGO	\$5,839,362	\$5,839,362
TOTAL LONG TERM LIABILITIES	<u>\$5,839,362</u>	<u>\$5,839,362</u>
OTHER LIABILITIES		
OTHER LIABILITIES	\$506,830	\$506,830
TOTAL OTHER LIABILITIES	<u>\$506,830</u>	<u>\$506,830</u>
TOTAL EQUITY	<u>-\$1,731,532</u>	<u>\$8,654,365</u>
TOTAL LIABILITIES AND EQUITY	<u><u>\$5,156,525</u></u>	<u><u>\$15,542,422</u></u>

NOTES (Substantially all disclosures omitted):

Internally prepared and not subjected to a compilation, review or audit; no assurance is provided.
This information is provided for discussion purposes only and is not presented in compliance with GAAP.
Year-end entries are not complete and are not expected to be material.

CONFIDENTIAL

UST-13, COMPARATIVE INCOME STATEMENT

For the month of			
GROSS SALES			
Less: Returns and Allowances			
Net Sales			
Cost of Sales: Beginning Inventory Add: Purchases Less: Ending Inventory Cost of Goods Sold			
GROSS MARGIN			
Other Operating Expenses:			
Officers' Salaries			
Other Salaries/Direct Labor			
Employee Benefits/Payroll Taxes			
Insurance			
Rent			
General and Administrative			
NET OPERATING PROFIT (LOSS)			
Add: Other Income			
Less: Interest Expense			
Other Adjustments to Income (Explain)			
Gain (Loss) on Sale of Assets			
Net Profit (Loss) Before Taxes			
Income Taxes			
NET PROFIT (LOSS)			

Notes:

See attached excel spreadsheet

UST-13, COMPARATIVE INCOME STATEMENT

Shilo Inns, Ocean Shores, LLC		Current Month November 30, 2020
Sales/Revenue:		
Gross Sales/Revenue		101,073.00
Less: Returns/Discounts		
Net Sales/Revenue		101,073.00
Cost of Goods Sold:		
Beginning Inventory at cost		
Purchases		
Less: Ending Inventory at cost		
Cost of Goods Sold (COGS)		-
Gross Profit		101,073.00
Other Operating Income (Itemize)		-
Operating Expenses:		
Payroll - Other Employees		43,468.23
Payroll Taxes /Benefits		5,369.15
Other Taxes (Sales Tax not Collected))		
Depreciation and Amortization		
Rent Expense - Real Property		
Lease Expense - Personal Property		
Insurance		
Real Property Taxes		
Personal Property Taxes		
Telephone and Utilities		5,804.18
Repairs and Maintenance		1,854.70
Travel and Entertainment (Itemize)		
Miscellaneous Operating Expenses (Itemize)		24,538.11
Total Operating Expenses		81,034.37
Net Gain/(Loss) from Operations		20,038.63
Non-Operating Income:		
Interest Income		-
Net Gain on Sale of Assets (Itemize)		-
Other (Itemize)		-

Total Non-Operating income -

Non-Operating Expenses:

Management fee

Interest Expense

Legal and Professional (Itemize)

Other (Itemize)

Total Non-Operating Expenses -

NET INCOME/(LOSS)

20,038.63

MISC OPERATING EXPENSE:

Sales/Use Tax/Excise Tax 21,739.49

Loyalty Program-Airline Miles

Loyalty Program-Franchise

Linen Supplies

Bathroom Supplies

Pool Chemicals

Cleaning Supplies

Continental Breakfast

Room Equipment 52.95

Guest Amenity Supplies 239.57

Guest Laundry/Soap

Housekeeping supplies 500.18

TV Cable & Sattelite

First Aid

High Speed Internet

Travel Agents

Taxi & Limo

Reservation fee

Resale/Sundries

Coin-Op Laundry

Radio Tradeout

Airport Advertising

Displays

Advertising & Promotion

Marketing Fee

Royalty Fee

Regional Expense-Sales

Office Supplies

Decorations

Operating Supplies

Maintenance Supplies/Tools 1,163.18

Miscellaneous	
Postage/Shipping	
Printer Supplies	
Printed Material	
Fuel Surcharge	
Credit Card Discounts	
Bad Debt	
Cash Over/Short	
Office Equipment	
Bank Fees	203.41
Equipment Rental	639.33
License & Misc Taxes	
Travel Expens-Admin.	
Late Fees/Penalties	
Attorney fees	
Professional fees	
Dues & Subscriptions	
Regional Expense-Admin	
Total Misc Operating Expense	24,538.11

UST-14, SUMMARY OF DEPOSITS & DISBURSEMENTS

INSTRUCTIONS: BEFORE COMPLETING THIS PAGE, prepare a UST-14 CONTINUATION SHEET (see next page) for each bank account or other source of the debtor's funds. The deposit and disbursement total from each CONTINUATION SHEET will be used to complete this SUMMARY.

The debtor is responsible for providing an accurate monthly disbursement total for the purpose of calculating its obligation pursuant to 28 U.S.C. Sec. 1930 (a)(6) to pay statutory fees to the United States Trustee. The disbursement total encompasses all payments made by the bankruptcy estate during the reporting month, whether made directly by the debtor or by another party for the debtor. It includes checks written and cash payments for inventory and equipment purchases, payroll and related taxes and expenses, other operating costs, and debt reduction. It also includes payments made pursuant to joint check arrangements and those resulting from a sale or liquidation of the debtor's assets. The only transactions normally excluded from the disbursement total are transfers within the same reporting month between multiple debtor accounts.

A fee payment is due within 30 days after the end of each calendar quarter, or on **April 30, July 31, October 31, and January 31**, respectively. Since the amount billed is an estimate, the debtor is responsible for paying the correct statutory fee based on its actual disbursements for the calendar quarter, or portion thereof the debtor was in Chapter 11. Failure to pay statutory fees to the United States Trustee is cause for conversion or dismissal of the case. If you have questions computing the disbursement total, contact the Bankruptcy Analyst assigned to your case at (206) 553-2000.

Summary of Deposits This Month

Deposits from UST-14 Continuation Sheet(s)	467,619.77
Cash receipts not included above (if any)	0.00
TOTAL RECEIPTS	467,619.77

Summary of Disbursements This Month

Disbursements from UST-14 Continuation Sheet(s)	(85,744.04)
Disbursements resulting from asset sales out of the ordinary course (see Page 13, Question 1)	0.00
Disbursements made by other parties for the debtor (if any, explain)	0.00
TOTAL DISBURSEMENTS	(85,744.04)
NET CASH FLOW (TOTAL RECEIPTS MINUS TOTAL DISBURSEMENTS)	381,875.73

At the end of this reporting month, did the debtor have any delinquent statutory fees owing to the United States Trustee? Yes ☐ No ☒ If Yes, list each quarter that is delinquent and the amount due.

(UST-14 CONTINUATION SHEETS, with attachments, should follow this page.)

Debtor Shilo Inn, Ocean Shores, LLC

Case Number

20-42348-BDL

Month Ending

November 2020

**UST-14, CONTINUATION SHEET
STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS**

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each bank account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name Account number	Bank of the Pacific, account number ending in 8165																			
Purpose of this account (select one): <input checked="" type="checkbox"/> General operating account <input type="checkbox"/> General payroll account <input type="checkbox"/> Tax deposit account (payroll, sales, gambling, or other taxes) <input type="checkbox"/> Other (explain) _____																				
Beginning cash balance		3,393.28																		
Add:	Transfers in from other estate bank accounts	0.00																		
	Cash receipts deposited to this account	4,270.51																		
	Financing or other loaned funds (identify source)	0.00																		
Total cash available this month		7,663.79																		
Subtract:	Transfers out to other estate bank accounts																			
	Cash disbursements from this account (total checks written plus cash withdrawals, if any)	(4,444.30)																		
Adjustments, if any (explain)																				
Ending cash balance		3,219.49																		
Does this CONTINUATION SHEET include the following supporting documents, as required: <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> </thead> <tbody> <tr> <td>A monthly bank statement (or trust account statement);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of receipts for that account (deposit log or receipts journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of disbursements for that account (check register or disbursement journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>and,</td> <td></td> <td></td> </tr> <tr> <td>If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>				Yes	No	A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	and,			If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Yes	No																		
A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
and,																				
If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		

UST-14 CONTINUATION SHEET, Number 1 of 9

OCEAN SHORES BRANCH

Page: 1

SHILO INN OCEAN SHORES LLC
11707 NE AIRPORT WAY
PORTLAND OR 97220-1075

Account Number: 08165
Statement Date: 11/30/20

31

COMMERCIAL ANALYSIS

SHILO INN OCEAN SHORES LLC

Acct 8165

Beginning Balance	11/01/20	3,393.28	
Deposits / Misc Credits	16	4,270.51	
Withdrawals / Misc Debits	2	4,444.30	
** Ending Balance	11/30/20	3,219.49	**
Service Charge		74.30	
Average Balance		3,116	
Average Collected Balance		3,116	
Minimum Balance		1,557	

DEPOSITS AND OTHER CREDITS

Date	Deposits	Activity Description
11/02	146.88	DEPOSIT
11/02	155.68	DEPOSIT
11/04	241.15	DEPOSIT
11/06	56.00	DEPOSIT
11/09	155.68	DEPOSIT
11/13	256.48	DEPOSIT
11/16	470.73	DEPOSIT
11/16	1,125.60	DEPOSIT
11/23	110.88	DEPOSIT
11/23	155.68	DEPOSIT
11/23	250.94	DEPOSIT
11/23	489.50	DEPOSIT
11/27	138.88	DEPOSIT
11/27	161.28	DEPOSIT
11/30	110.88	DEPOSIT
11/30	244.27	DEPOSIT

OTHER DEBITS AND WITHDRAWALS

Date	Withdrawals	Activity Description
11/16	4,370.00	BENE:SHILO INN OCEAN SHORES LLC
11/17	74.30	TRN:P202011160064622
		ANALYSIS ACTIVITY

SHILO INN OCEAN SHORES LLC

Account Number: 8165
Statement Date: 11/30/20

DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
11/02	3,695.84	11/13	4,405.15	11/23	2,564.18
11/04	3,936.99	11/16	1,631.48	11/27	2,864.34
11/06	3,992.99	11/17	1,557.18	11/30	3,219.49
11/09	4,148.67				

11-4-20

SHILO INN
11600 SW SHILO LN
PORTLAND, OR 97225-5919

DATE	CURRENCY	COINS	TOTAL CASH	CHECKS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	TOTAL FROM OTHER SIDE OR ATTACHED LIST	PLEASE RE-ENTER TOTAL HERE	DOLLARS	CENT
																																		54	00	

Bank of the Pacific
11/05/2015 5:26:27
56 \$0
12:37:14 Curr
BR# 2 TLR# 204 TRM# 30

⑆5012⑈7707⑆ 8165⑈ 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. IF CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

TICKET
TOTAL ITEMS

DEPOSITS MAY NOT
BE AVAILABLE FOR
IMMEDIATE WITHDRAWAL.

98-770/1251

RE-ENTER GRAND TOTAL
IN SCREENED BOXES

54.00

DATE _____

CURRENCY	DOLLARS	CENT
COINS	256	47
TOTAL CASH	256	47
CHECKS		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
TOTAL FROM OTHER SIDE OR ATTACHED LIST		
PLEASE RE-ENTER TOTAL HERE	256	47

SHILO INN
11600 SW SHILO LN
PORTLAND, OR 97225-5919

Merchant Times 11/15/10
 Bank of the Pacific
 88255 844
 BankofthePacific.com
 ACCT # www.BOP.com 12:04:17 Curr
 BR# 2 TLR# 204 TRN# 45

15012 77071 816511 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

TICKET
TOTAL ITEMS

**DEPOSITS MAY NOT
BE AVAILABLE FOR
IMMEDIATE WITHDRAWAL.**

98-770/1251

RE-ENTER GRAND TOTAL
IN SCREENED BOXES

256.48

DATE 11-13-20

	DOLLARS	CENTS
CURRENCY	470	73
COINS		
TOTAL CASH	470	73
CHECKS		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
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23		
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25		
26		
27		
28		
TOTAL FROM OTHER SIDE OR ATTACHED LIST		
PLEASE RE-ENTER TOTAL HERE		

Merchant Depos 11/16/20
 ACCT # *****9165
 BR# 2 TRF 206
 16:58:40 CMT
 TRF# 86

SHILO INN
 11600 SW SHILO LN
 PORTLAND, OR 97225-5919



\$

470.73

⑆5012⑈7707⑆ 8165⑈ 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. || CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

DEPOSIT TICKET
 TOTAL ITEMS

DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL.

98-770/1251

RE-ENTER GRAND TOTAL IN SCREENED BOXES

DATE 11-14-20

	DOLLARS	CENTS
CURRENCY	1135	60
COINS		
TOTAL CASH	1135	60
CHECKS		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
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19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
TOTAL FROM OTHER SIDE OR ATTACHED LIST		
PLEASE RE-ENTER TOTAL HERE		

Merchant Depos 11/16/20
 ACCT # *****9165
 BR# 2 TRF 206
 16:51:43 CMT
 TRF# 86

SHILO INN
 11600 SW SHILO LN
 PORTLAND, OR 97225-5919



\$

1135.60

⑆5012⑈7707⑆ 8165⑈ 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. || CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

DEPOSIT TICKET
 TOTAL ITEMS

DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL.

98-770/1251

RE-ENTER GRAND TOTAL IN SCREENED BOXES

DATE 11-22-20

	DOLLARS	CENT
CURRENCY	155	00
COINS		00
TOTAL CASH	155	00
CHECKS		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
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14		
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18		
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21		
22		
23		
24		
25		
26		
27		
28		
TOTAL FROM OTHER SIDE OR ATTACHED LIST		
PLEASE RE-ENTER TOTAL HERE		

12:11:11 CURT TRN# 51

ACCT # 8165 TRN# 206

Merchant Depos 11/23/20

155.68

155.00

SHILO INN
 11600 SW SHILO LN
 PORTLAND, OR 97225-5919



\$

155.68

⑆5012⑈7707⑆ 8165⑈ 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

TICKET
 TOTAL ITEMS

DEPOSITS MAY NOT
 BE AVAILABLE FOR
 IMMEDIATE WITHDRAWAL.

98-770/1251

RE-ENTER GRAND TOTAL
 IN SCREENED BOXES

TICKET
TOTAL ITEMS

**DEPOSITS MAY NOT
BE AVAILABLE FOR
IMMEDIATE WITHDRAWAL.**

98-770/1251

**RE-ENTER GRAND TOTAL
IN SCREENED BOXES**

SHILO INN
11600 SW SHILO LN
PORTLAND, OR 97225-5919



1:50 1 2 770 71: 816511 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

DATE		DOLLARS		CENTS	
CURRENCY					
COINS					
TOTAL CASH					
CHECKS					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
TOTAL FROM OTHER SIDE OR ATTACHED LIST					
<div> <div>PLEASE RE-ENTER TOTAL HERE</div> <div>7-01</div> </div>					

**DEPOSIT
TICKET**

TOTAL ITEMS

**DEPOSITS MAY NOT
BE AVAILABLE FOR
IMMEDIATE WITHDRAWAL.**

98-770/1251

**RE-ENTER GRAND TOTAL
IN SCREENED BOXES**

SHILO INN
11600 SW SHILO LN
PORTLAND, OR 97225-5919



1:50 1 2 7707: 8165 0020

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.

DATE	CURRENCY	DOLLARS	CENTS
11-21-20	COINS	489	50
	TOTAL CASH	489	50
	CHECKS		
	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
	9		
	10		
	11		
	12		
	13		
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	26		
	27		
	28		
	TOTAL FROM OTHER SIDE OR ATTACHED LIST		

**DEPOSIT
TICKET**

TOTAL ITEMS

**DEPOSITS MAY NOT
BE AVAILABLE FOR
IMMEDIATE WITHDRAWAL.**

98-770/1251

**RE-ENTER GRAND TOTAL
IN SCREENED BOXES**

SHILO INN
11600 SW SHILO LN
PORTLAND, OR 97225-5919



1:50 1 2 7 70 71: 8 16 5 11 00 20

USE ROUTING NUMBER FROM YOUR CHECKS FOR AUTOMATIC PAYMENTS. CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE AND ANY APPLICABLE COLLECTION AGREEMENT.



☐ Agreement on file

Account to Debit

Name **Shilo Inn**

Physical Address

11707 NE Airport Way

City

Portland

State

OR

Zip

97220

Mailing Address (if different than above)

Account Number

8165

Repetitive Number

Shilo/Shilo

Amount

4,370 -

Destination Bank

Bank Name

US Bank

ABA Routing Number

123000220

Phone number

Branch

City

State

Zip

Credit

Name

Shilo Inn Ocean Shores, LLC

Address

11707 NE Airport Way

City

Portland

State

OR

Zip

97220

Account Number

4035

By order of (Name of Customer Requesting Transfer)

Special Instructions

Signature of Employee:

Shannon M. Hemstreet

Date

11/16/2020

I agree that in carrying out this wire transfer, Bank of the Pacific acts only as my agent and has no duties other than to act in good faith and with reasonable care. I represent that the information filled out above is correct. I agree to be responsible for any errors if any of this information is incorrect. I agree to notify the Bank within 14 days of the date of transfer of any errors. I also promise to promptly notify and reimburse the Bank should there be any error in my favor as a result of this wire transfer.

Customer Signature:

Shannon M. Hemstreet

Date

11/16/2020

Customer Signature:

Paul L. Hemstreet

Date

11/16/2020

(INTERNAL USE: Staple a copy of the template to back of this agreement)

5/2011

**UST-14, CONTINUATION SHEET
STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS**

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each bank account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name Account number	JP Morgan Chase Bank, N.A., account number ending 1695																			
Purpose of this account (select one): <input checked="" type="checkbox"/> General operating account <input type="checkbox"/> General payroll account <input type="checkbox"/> Tax deposit account (payroll, sales, gambling, or other taxes) <input type="checkbox"/> Other (explain) _____																				
Beginning cash balance		2,742.90																		
Add: Transfers in from other estate bank accounts		0.00																		
Cash receipts deposited to this account		5,337.34																		
Financing or other loaned funds (identify source)		0.00																		
Total cash available this month		8,080.24																		
Subtract: Transfers out to other estate bank accounts		0.00																		
Cash disbursements from this account (total checks written plus cash withdrawals, if any)		(8,075.24)																		
Adjustments, if any (explain)																				
Ending cash balance		5.00																		
Does this CONTINUATION SHEET include the following supporting documents, as required: <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 10%; text-align: center;">No</td> </tr> <tr> <td>A monthly bank statement (or trust account statement);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of receipts for that account (deposit log or receipts journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of disbursements for that account (check register or disbursement journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>and,</td> <td></td> <td></td> </tr> <tr> <td>If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				Yes	No	A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	and,			If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Yes	No																		
A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
and,																				
If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																		



JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

October 31, 2020 through November 30, 2020

Account Number: **1695**

CUSTOMER SERVICE INFORMATION

Web site: **www.Chase.com**
Service Center: **1-877-425-8100**
Deaf and Hard of Hearing: **1-800-242-7383**
Para Espanol: **1-888-622-4273**
International Calls: **1-713-262-1679**

00145757 DRE 703 219 33620 NNNNNNNNNN 1 000000000 64 0000

SHILO INN, OCEAN SHORES, LLC
11707 NE AIRPORT WAY
PORTLAND OR 97220-1075

CHECKING SUMMARY

Chase Platinum Business Checking

	INSTANCES	AMOUNT
Beginning Balance		\$2,742.90
Deposits and Additions	14	5,337.34
Checks Paid	4	-7,938.67
Electronic Withdrawals	2	-136.57
Ending Balance	20	\$5.00

Your Chase Platinum Business Checking account provides:

- No transaction fees for unlimited electronic deposits (including ACH, ATM, wire, Chase Quick Deposit)
- 500 debits and non-electronic deposits (those made via check or cash in branches) per statement cycle
- \$25,000 in cash deposits per statement cycle
- Unlimited return deposited items with no fee

There are additional fee waivers and benefits associated with your account – please refer to your Deposit Account Agreement for more information.

DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
11/02	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201101 CO Entry Descr: Settlementsec: CCD Trace#: 091000018526346 Eed: 201102 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	\$308.15
11/04	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201103 CO Entry Descr: Settlementsec: CCD Trace#: 091000010364926 Eed: 201104 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	318.90
11/05	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201104 CO Entry Descr: Settlementsec: CCD Trace#: 091000010910196 Eed: 201105 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	981.10
11/09	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201108 CO Entry Descr: Settlementsec: CCD Trace#: 091000014612003 Eed: 201109 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	157.60
11/10	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201109 CO Entry Descr: Settlementsec: CCD Trace#: 091000017653217 Eed: 201110 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	538.17
11/16	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201113 CO Entry Descr: Settlementsec: CCD Trace#: 091000016069032 Eed: 201116 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	430.52
11/19	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201118 CO Entry Descr: Settlementsec: CCD Trace#: 091000010098419 Eed: 201119 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	406.39



October 31, 2020 through November 30, 2020

Account Number: 1695

DEPOSITS AND ADDITIONS (continued)

DATE	DESCRIPTION	AMOUNT
11/20	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201119 CO Entry Descr: Settlementsec: CCD Trace#: 091000017360675 Eed: 201120 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	202.54
11/23	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201122 CO Entry Descr: Settlementsec: CCD Trace#: 091000017801415 Eed: 201123 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	253.10
11/23	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201120 CO Entry Descr: Settlementsec: CCD Trace#: 091000019304311 Eed: 201123 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	121.58
11/23	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201121 CO Entry Descr: Settlementsec: CCD Trace#: 091000018469793 Eed: 201123 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	117.73
11/24	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201123 CO Entry Descr: Settlementsec: CCD Trace#: 091000019374318 Eed: 201124 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	432.34
11/25	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201124 CO Entry Descr: Settlementsec: CCD Trace#: 091000012284335 Eed: 201125 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	349.59
11/27	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201125 CO Entry Descr: Settlementsec: CCD Trace#: 091000013182893 Eed: 201127 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	719.63
Total Deposits and Additions		\$5,337.34

CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
1001 ^	11/12	11/12	\$4,905.25
1002 ^	11/16	11/16	430.52
1003 ^		11/23	1,101.34
1004 ^		11/30	1,501.56
Total Checks Paid			\$7,938.67

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

^ An image of this check may be available for you to view on Chase.com.

ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
11/06	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201105 CO Entry Descr: Collectionsec: CCD Trace#: 091000012292783 Eed: 201106 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	\$122.08
11/09	Orig CO Name: American Express Orig ID: 1134992250 Desc Date: 201107 CO Entry Descr: Collectionsec: CCD Trace#: 091000015716033 Eed: 201109 Ind ID: Ocean Shrs Ind Name: Shilo Inn/Oc5460101660	14.49
Total Electronic Withdrawals		\$136.57



October 31, 2020 through November 30, 2020

Account Number:

1695

DAILY ENDING BALANCE

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
11/02	\$3,051.05	11/10	4,910.25	11/23	5.00
11/04	3,369.95	11/12	5.00	11/24	437.34
11/05	4,351.05	11/16	5.00	11/25	786.93
11/06	4,228.97	11/19	411.39	11/27	1,506.56
11/09	4,372.08	11/20	613.93	11/30	5.00

SERVICE CHARGE SUMMARY

Monthly Service Fee	\$0.00
Other Service Charges	\$0.00
Total Service Charges	\$0.00

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS: Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS: Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC



JPMorgan Chase Bank, N.A. Member FDIC



October 31, 2020 through November 30, 2020

Account Number: **1695**

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Merchant Financial Activity Statement

Settlements Grouped by: Submitting Location
 Statement Level of Detail: Detailed
 Location(s) Searched: All Locations
 Date Type: Settlement Date
 Date Range: November 1 - 30, 2020
 Generated: December 4, 2020 at 10:46:14 AM



Submitting Location: \$460101660		OCEAN SHRS Payee Location: \$460101660		OCEAN SHRS		Fees &		Settlement		Settlement	
Trans	Date	Amex	Submission	Trans	Count	Total	Charges	Credits	Discount	Amount	#
		Date	Amount								
SUBMISSIONS											
10/30/2020		10/30/2020	\$319.01	3		\$319.01		\$0.00	\$10.56	\$308.15	306R2477
11/01/2020		11/01/2020	\$330.62	3		\$330.62		\$0.00	\$11.42	\$318.90	308R2210
11/02/2020		11/02/2020	\$1,016.28	5		\$1,016.28		\$0.00	\$34.68	\$981.10	309H7804
11/03/2020		11/03/2020	(\$122.08)	1		\$0.00		\$122.08	\$0.00	(\$122.08)	310T6562
11/05/2020		11/05/2020	(\$11.09)	2		\$99.79		\$110.88	\$3.30	(\$14.49)	312U7160
11/06/2020		11/06/2020	\$164.87	3		\$264.66		\$99.79	\$7.07	\$157.60	313Q8935
11/07/2020		11/07/2020	\$554.74	5		\$554.74		\$0.00	\$16.07	\$538.17	314T6208
11/11/2020		11/11/2020	\$446.04	3		\$446.04		\$0.00	\$15.22	\$430.52	318T8572
11/16/2020		11/16/2020	\$421.12	4		\$421.12		\$0.00	\$14.33	\$406.39	323R8970
11/17/2020		11/17/2020	\$209.98	2		\$209.98		\$0.00	\$7.24	\$202.54	324T9474
11/18/2020		11/18/2020	\$126.17	2		\$126.17		\$0.00	\$4.39	\$121.58	325T9726
11/19/2020		11/19/2020	\$122.08	1		\$122.08		\$0.00	\$4.25	\$117.73	326U8018
11/20/2020		11/20/2020	\$262.19	2		\$262.19		\$0.00	\$8.89	\$253.10	327R1105
11/21/2020		11/21/2020	\$445.56	3		\$445.56		\$0.00	\$12.87	\$432.34	328T6499
11/22/2020		11/22/2020	\$361.76	2		\$361.76		\$0.00	\$11.97	\$349.59	329R9593
11/23/2020		11/23/2020	\$745.02	5		\$745.02		\$0.00	\$24.89	\$719.63	330R9291
			\$5,392.27	46		\$5,725.02		\$332.75	\$187.15	\$5,200.77	

Totals

SHILO INN, OCEAN SHORES, LLC
707 OCEAN SHORES BLVD. NW
OCEAN SHORES, WA 98569-9345

1001

PAY
TO THE
ORDER OF

DATE 11/12/2020

90-7162/3222

Shilo Inn Ocean Shores
forty nine hundred five + 25/100

\$4,905.25



JPMorgan Chase Bank, N.A.
www.Chase.com

DOLLARS

Security Features
Details on Back

FOR

Maui L. Hemstreet

⑈001001⑈ ⑆322271627⑆

1695⑈

1002

SHILO INN, OCEAN SHORES, LLC
707 OCEAN SHORES BLVD. NW
OCEAN SHORES, WA 98569-9345

90-7162/3222


DATE 11/16/2020

PAY
TO THE
ORDER OF

Shilo Inn Ocean Shores

\$430.52

four hundred thirty & 52/100

DOLLARS  Security Features
Included
Details on Back

CHASE 
JPMorgan Chase Bank, N.A.
www.Chase.com

Mark A. Hemstreet  NP

FOR

⑈001002⑈ ⑆322271627⑆

1695⑈

CHASE for BUSINESS

Printed from Chase for Business

\$1,101.34

Total

Nov 23, 2020

Post date

1003

Check #

SHILO INN, OCEAN SHORES, LLC 707 OCEAN SHORES BLVD. NW OCEAN SHORES, WA 98569-9345		1003
DATE <u>11/23/2020</u>		90-7182/3222
PAY TO THE ORDER OF <u>Shilo Ocean Shores</u>	\$ <u>1,101.34</u>	
<u>Eleven hundred one + 34/100</u>	DOLLARS	
CHASE JPMorgan Chase Bank, N.A. www.Chase.com	<u>Mack L. Hemmick</u>	
FOR _____		
⑈001003⑈ - ⑈322271627⑈		⑈695⑈

JPMorgan Chase Bank, N.A. Member FDIC

©2020 JPMorgan Chase & Co.

Equal Opportunity Lender

1004

SHILO INN, OCEAN SHORES, LLC

707 OCEAN SHORES BLVD. NW
OCEAN SHORES, WA 98569-9345


DATE 11/30/2020 90-7162/3222

PAY
TO THE
ORDER OF

Shilo Inn Ocean Shores

\$1,501.56

fifteen hundred one & 56/100

DOLLARS  Security Features
Included.
Details on Back.

CHASE 
JPMorgan Chase Bank, N.A.
www.Chase.com

FOR

Mad L. Hemstreet 

⑈001004⑈ ⑆322271627⑆

--- 1695⑈

**UST-14, CONTINUATION SHEET
STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS**

INSTRUCTIONS: Prepare a CONTINUATION SHEET for each bank account or other source of the debtor's funds and attach supporting documents as indicated on the checklist below.

Depository (bank) name Account number	US, Bank, Estate of Shilo Inn Ocean Shores, LLC Debtor in Possession, account ending 4035																			
Purpose of this account (select one): <input checked="" type="checkbox"/> General operating account <input type="checkbox"/> General payroll account <input type="checkbox"/> Tax deposit account (payroll, sales, gambling, or other taxes) <input type="checkbox"/> Other (explain) _____																				
Beginning cash balance		0.00																		
Add: Transfers in from other estate bank accounts		0.00																		
Cash receipts deposited to this account		458,011.92																		
Financing or other loaned funds (identify source)		0.00																		
Total cash available this month		458,011.92																		
Subtract: Transfers out to other estate bank accounts																				
Cash disbursements from this account (total checks written plus cash withdrawals, if any)		(73,224.50)																		
Adjustments, if any (explain)																				
Ending cash balance		384,787.42																		
Does this CONTINUATION SHEET include the following supporting documents, as required: <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 10%; text-align: center;">No</td> </tr> <tr> <td>A monthly bank statement (or trust account statement);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of receipts for that account (deposit log or receipts journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>A detailed list of disbursements for that account (check register or disbursement journal);</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>and,</td> <td></td> <td></td> </tr> <tr> <td>If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>				Yes	No	A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>	and,			If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Yes	No																		
A monthly bank statement (or trust account statement);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of receipts for that account (deposit log or receipts journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
A detailed list of disbursements for that account (check register or disbursement journal);	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		
and,																				
If applicable, a detailed list of funds received and/or disbursed by another party for the debtor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>																		



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

3246

TRN

S

Y ST01

Account Number:

4035

Statement Period:

Nov 12, 2020

through

Nov 30, 2020

Page 1 of 3



000122749 01 SP 0.500 000638650189047 P N
ESTATE OF SHILO INN OCEAN SHORES LLC
DEBTOR IN POSSESSION
BANKRUPTCY CASE # 20-42348-BDL
707 OCEAN SHORES BLVD NW
OCEAN SHORES WA 98569-9345



To Contact U.S. Bank

24-Hour Business
Solutions:

1-800-673-3555

U.S. Bank accepts Relay Calls
Internet:

usbank.com

NEWS FOR YOU

Scan here with your phone's camera to download the U.S. Bank Mobile App.



INFORMATION YOU SHOULD KNOW

Thank you for choosing U.S. Bank. We would like to inform you of upcoming changes that may impact your account. The chart below lists account modifications that go into effect beginning January 1, 2021.

To determine if these changes will impact you, review the 'Analysis Service Charge Detail' section of this statement for your current usage of these services. This is typically found on the last page.

If you have any questions or would like to discuss your account options, please call us at 1.800.673.3555. We accept relay calls.

Current	New (as of January 1, 2021)
<u>Paper Statement</u> Image Statements (Front Only): Silver Business Checking Accounts - \$5.00 Gold Business Checking Accounts - Free Image Statements (Front and Back): Gold Business Checking Accounts - \$8.00 Non-Profit Business Checking Accounts - \$8.00	<u>Paper Statement</u> Image Statements (Front and Back*): Silver Business Checking Accounts - \$8.00 Gold Business Checking Accounts - \$3.00 Image Statements (Front and Back): Silver Business Checking Accounts - \$8.00 Gold Business Checking Accounts - \$3.00 Non-Profit Business Checking Accounts - Free <small>*Front Image Statement no longer available starting Jan 1st, 2021.</small>
<u>Returned Deposited Items</u> Returned Check (Per Item) - \$14.00	<u>Returned Deposited Items</u> Returned Check (Per Item) - \$15.00
<u>Branch Cash Services</u> Coin and Currency Orders: Currency Ordered (per strap) - \$0.80 Loose Currency Ordered (per \$100) - \$0.20 Loose Coin Ordered (per bag) - \$6.00 Rolled Coin Ordered (per roll) - \$0.20 Rolled Coin Ordered (per box) - \$6.00 Cash Deposits: Coin Deposited (per roll) - \$0.15 Fed Ready Coin Deposit - \$3.75 Loose Mixed Coin Deposited (per bag) - \$11.00	<u>Branch Cash Services</u> Coin and Currency Orders: Currency Ordered (per strap) - \$0.85 Loose Currency Ordered (per \$100) - \$0.25 Loose Coin Ordered (per bag) - \$7.00 Rolled Coin Ordered (per roll) - \$0.25 Rolled Coin Ordered (per box) - \$7.00 Cash Deposits: Coin Deposited (per roll) - \$0.20 Fed Ready Coin Deposit - \$4.00 Loose Mixed Coin Deposited (per bag) - \$12.00



DEBTOR IN POSSESSION
BANKRUPTCY CASE # 20-42348-BDL
707 OCEAN SHORES BLVD NW
OCEAN SHORES WA 98569-9345

Account Number:
4035
Statement Period:
Nov 12, 2020
through
Nov 30, 2020



Page 2 of 3

INFORMATION YOU SHOULD KNOW

(CONTINUED)

Current	New (as of January 1, 2021)
International Process Fee for U.S. Bank Debit Card 2% of the purchase amount	International Process Fee for U.S. Bank Debit Card 3% of the purchase amount

U.S. BANK SILVER - BUSINESS CHECKING

Member FDIC

U.S. Bank National Association

Account Number 4035

Account Summary

# Items			
Beginning Balance on Nov 12	\$	0.00	Number of Days in Statement Period
Customer Deposits	4	7,938.67	19
Other Deposits	20	450,073.25	
Other Withdrawals	4	2,483.34	
Checks Paid	25	70,741.16	
Ending Balance on Nov 30, 2020	\$	384,787.42	

Customer Deposits

Number	Date	Ref Number	Amount	Number	Date	Ref Number	Amount
	Nov 12	8956764535	4,905.25		Nov 23	8055781515	1,101.34
	Nov 16	8058030150	430.52		Nov 30	8054687449	1,501.56
Total Customer Deposits							\$ 7,938.67

Other Deposits

Date	Description of Transaction	Ref Number	Amount
iv 13	Electronic Deposit REF=203170223963520N00	From BANKCARD-8566 1592126793BTOT DE	\$ 2,829.31
iv 16	Electronic Deposit REF=203210150410050N00	From BANKCARD-8566 1592126793BTOT DE	3,296.45
iv 16	Wire Credit REF000016 ORG=SHILO INN OCEAN	BK PACIFIC ABERDEE 201116033193 SHORES LLC 11707 NE AIRPORT	4,370.00
iv 16	Electronic Deposit REF=203210107719250N00	From BANKCARD-8566 1592126793BTOT DE	6,575.54
iv 16	Electronic Deposit REF=203210150410040N00	From BANKCARD-8566 1592126793BTOT DEP	8,595.83
iv 16	Electronic Deposit REF=203210107719340N00	From BANKCARD-8566 1592126793BTOT ADJ	127,254.67
iv 17	Electronic Deposit REF=203210239360570N00	From BANKCARD-8566 1592126793BTOT DEP	2,229.90
iv 18	Electronic Deposit REF=203220141469380N00	From BANKCARD-8566 1592126793BTOT DEP	1,519.44
iv 20	Electronic Deposit REF=203240126516280N00	From BANKCARD-8566 1592126793BTOT DEP	2,240.96
iv 23	Electronic Deposit REF=203280050106550N00	From BANKCARD-8566 1592126793BTOT DEP	2,718.94
iv 23	Electronic Deposit REF=203280012472340N00	From BANKCARD-8566 1592126793BTOT DEP	3,915.25
iv 23	Electronic Deposit REF=203280050106540N00	From BANKCARD-8566 1592126793BTOT DE	4,341.05
iv 24	Electronic Deposit REF=203280152821300N00	From BANKCARD-8566 1592126793BTOT DEP	2,081.21
iv 24	Wire Credit REF014527 ORG=WELLS FARGO BANK 401	WELLS SF 201124032504 S TRYON ST	256,016.92
iv 25	Electronic Deposit REF=203290197136660N00	From BANKCARD-8566 1592126793BTOT DEF	585.40
iv 27	Electronic Deposit REF=203320099542010N00	From BANKCARD-8566 1592126793BTOT DEP	2,042.47
iv 27	Electronic Deposit REF=203320129246000N00	From BANKCARD-8566 1592126793BTOT DE	5,193.26

* Refund from Rial to



DEBTOR IN POSSESSION
BANKRUPTCY CASE # 20-42348-BDL
707 OCEAN SHORES BLVD NW
OCEAN SHORES WA 98569-9345

Account Number:

4035

Statement Period:

Nov 12, 2020

through

Nov 30, 2020

Page 3 of 3

S. BANK SILVER - BUSINESS CHECKING

(CONTINUED)

Bank National Association

Account Number

4035

Other Deposits (continued)

Date	Description of Transaction	Ref Number	Amount
iv 30	Electronic Deposit REF=203350131460310N00	From BANKCARD-8566 1592126793BTOT DEP	2,749.11
iv 30	Electronic Deposit REF=203350092523630N00	From BANKCARD-8566 1592126793BTOT DEP	4,328.71
iv 30	Electronic Deposit REF=203350131460300N00	From BANKCARD-8566 1592126793BTOT DEP	7,188.83
Total Other Deposits			\$ 450,073.25

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
iv 19	Electronic Withdrawal REF=203230144311550N00	To BANKCARD-8566 1592126793BTOT DEP	\$ 137.28-
iv 23	Electronic Withdrawal REF=203280066308370Y00	To DLX FOR BUSINESS 1411877307Deluxe SBS02048428948128	129.11-
iv 23	Electronic Withdrawal REF=203280012472400N00	To BANKCARD-8566 1592126793BTOT ADJ 518089140028788	261.07-
iv 23	Electronic Withdrawal REF=203280018348460N00	To AMEX EPAYMENT 0005000040ACH PMT COP000004650878	1,955.88-
Total Other Withdrawals			\$ 2,483.34-

Checks Presented Conventionally

Check	Date	Ref Number	Amount	Check	Date	Ref Number	Amount
01	Nov 25	8653878224	48,837.38	55275	Nov 27	9254467578	1,079.31
05*	Nov 30	8055675289	639.33	55276	Nov 25	8654597995	970.53
264*	Nov 19	8952898459	885.29	55277	Nov 27	9254755986	960.27
265	Nov 19	8954516575	1,833.22	55278	Nov 27	9254824087	634.77
266	Nov 24	8356564776	295.10	55279	Nov 27	9254755984	566.89
267	Nov 24	8356611966	3,659.78	55280	Nov 27	9254467490	761.50
268	Nov 27	9254824021	755.02	55281	Nov 27	9253435975	552.05
269	Nov 27	9254755987	807.73	55282	Nov 30	8056629355	847.86
270	Nov 27	9254013975	836.11	55283	Nov 25	8655005208	413.28
271	Nov 25	8654598037	708.07	55284	Nov 27	9254755985	540.37
272	Nov 27	9254014929	882.62	55285	Nov 27	9252556917	739.71
273	Nov 27	9254013974	564.71	55286	Nov 27	9254042750	938.87
274	Nov 25	8654121237	1,031.39				

* Gap in check sequence

Conventional Checks Paid (25)

\$ 70,741.16-

Balance Summary

Date	Ending Balance	Date	Ending Balance	Date	Ending Balance
iv 12	4,905.25	Nov 18	162,006.91	Nov 24	425,265.85
iv 13	7,734.56	Nov 19	159,151.12	Nov 25	373,890.60
iv 16	158,257.57	Nov 20	161,392.08	Nov 27	370,506.40
iv 17	160,487.47	Nov 23	171,122.60	Nov 30	384,787.42

Balances only appear for days reflecting change.

Transaction Detail

SHILO MANAGEMENT CORPORATION

SinglePoint

Printed on 12/10/2020 at 02:05 PM PST



Transaction Detail for 11/24/2020

Account	CCY	Amount	Transaction Description	Action
Shilo Inn Ocean Shores LLC/ [REDACTED] 4035	USD	\$256,016.92	Incoming Fedwire(s)	
WT76 REF014527 WELLS SF [REDACTED] 2504				
WELLS FARGO BANK 401 S TRYON ST				
Bank Reference: WIRE XFER				
Transaction Reference:				

* Refund from Wells Fargo
for funds taken after
eff. 11 filing

CHECK	TYPE	CK STAT	INVOICE	IN/CHK DATE	CO	DEPT	ACCT	SUB	DI STRIBUTION AMOUNT	DI SCOUNT TAKEN	DESCRIPTION	CHECK TOTAL
186	SHILO MANAGEMENT CORP											
1001	REG	PAID	112520/BO/PYRL	11/25/20	BO 0		240002		48,837.38		11-2020 PAYROLL REIMBURSE	48,837.38
				11/25/20			* CHECK TOTAL		48,837.38			
37012	ADVANCED REEF MANAGEMENT											
1002	REG	PAID	110220/BO	11/02/20	BO 1		5719		1,854.70		10/06-10/27/20	
				11/25/20			* CHECK TOTAL		1,854.70			1,854.70
6982	GRAYS HARBOR PUD											
1004	REG	PAID	2454300000/NOV	11/20/20	BO 1		5405		5,804.18		10/20-11/18/20	
				11/25/20			* CHECK TOTAL		5,804.18			5,804.18
4753	WASHINGTON AUTOMATED INC											
1005	REG	PAID	4060-72914/BO	10/21/20	BO 1		5843		639.33		08/21/18-08/21/2023	639.33
				11/25/20			* CHECK TOTAL		639.33			
580	WASHINGTON DEPT OF REVENUE											
1006	REG	PAID	S249686/1020/BO	10/31/20	BO 0		240008		21,739.49		MO EXCISE TAX 10/2020	21,739.49
				11/25/20			* CHECK TOTAL		21,739.49			
12345	AMERICAN EXPRESS/MSH REIMBURSEMENT											
11001	REG	PAID	112020/CH11/BO	11/20/20	BO 0		191001		1,955.88		OCEAN SHORES CH 11	1,955.88
				11/20/20			* CHECK TOTAL		1,955.88			
							** FINAL TOTALS		80,830.96			80,830.96

Close

Front:

1001

Da

Memo Reimbursement
11-1-2020 to 10-11-2020
1230002201

403511 1001

LOOK FOR FR

11252020 11:55 AM PST 0006004500004

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE *

DATE _____

☐ CHECK HERE AFTER MOBILE OR REMOTE DEPOSIT

ENDORSE HERE

Deposit Entry

[illegible]

Close

1/1

Payroll Pay Statements: Default

Default Location

Last Name Ascending

Employee Filter: All Employees

11/17/2020 08:42a

Shelly J. Meyer

SHILO INNS (6013713)

CLEARED	2,718.51
11.19.2020	(2,718.51)

Type	Status	#	Pay Date	Net Payment	CLEARED	NOTES
Regular	Finalized	55264	11/18/2020	\$885.29	11.19.2020	
Regular	Finalized	55265	11/18/2020	\$1,833.22	11.19.2020	
				\$2,718.51		
				\$2,718.51		

Print

Close

Account #: [REDACTED] 4035 MICR Acct. #: [REDACTED] 4035 Check No.: 55266
 Transaction Type: Check Amount: \$295.10 Date: 11/24/2020
 Sequence Number: 8356564776

Front:

THIS DOCUMENT HAS MICROPRINTING IN THE BORDER, SECURITY FEATURES AND A TRUE WATERMARK IN THE PAPER.

Shilo Inn, Ocean Shores, LLC
 DIP, Case No. No. 20-42348-BDL
 11707 NE Airport Way
 Portland, OR 97220

US BANK NA Check Date: 11/18/2020
 22-0022 Check #: 55266
 1230 Case #: 19-2-1578

Pay To The Order Of DYNAMIC COLLECTORS
 Amount: Two Hundred Ninety Five Dollars and 10/100 Cents \$ 295.10

11/18/2020 55266
 DYNAMIC COLLECTORS
 790 South Market Boulevard
 Chehalis, WA 98532

Mark A. Hemmick
 Authorized Signature

⑈ 55266 ⑈ ⑆ 123000 220 ⑆ 4035 ⑈

Back:

0040065808

125100607<
 Security State Bk 040
 2020-11-24
 0040065808
 Batch 248831575

ENDORSE HERE
 X
 PAY TO THE ORDER OF
 SECURITY STATE BANK
 CHEHALIS, WA 98532
 125100607
 FOR DEPOSIT ONLY
 DYNAMIC COLLECTORS INC TRUST
 4001381470

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
 MICR LINE (DO NOT WRITE OR SIGN BELOW THIS LINE)

Payroll Pay Statements: Default

Default Location

Last Name Ascending

Employee Filter: All Employees

11/23/2020 11:12a

Shelly J. Meyer

SHILO INNS (6013713)

CLEARED 14,591.06

11.25.2020 (3,123.27)

11.27.2020 (10,619.93)

11.30.2020 (847.86)

Ocean Shores - OE

(0.00)

Type	Status	#	Pay Date	Net Payment	CLEARED	NOTES
Regular	Finalized	55268	11/25/2020	\$755.02	11.27.2020	
Regular	Finalized	55269	11/25/2020	\$807.73	11.27.2020	
Regular	Finalized	55270	11/25/2020	\$836.11	11.27.2020	
Regular	Finalized	55271	11/25/2020	\$708.07	11.25.2020	
Regular	Finalized	55272	11/25/2020	\$882.62	11.27.2020	
Regular	Finalized	55273	11/25/2020	\$564.71	11.27.2020	
Regular	Finalized	55274	11/25/2020	\$1,031.39	11.25.2020	
Regular	Finalized	55275	11/25/2020	\$1,079.31	11.27.2020	
Regular	Finalized	55276	11/25/2020	\$970.53	11.25.2020	
Regular	Finalized	55277	11/25/2020	\$960.27	11.27.2020	
Regular	Finalized	55278	11/25/2020	\$634.77	11.27.2020	
Regular	Finalized	55279	11/25/2020	\$566.89	11.27.2020	
Regular	Finalized	55280	11/25/2020	\$761.50	11.27.2020	
Regular	Finalized	55281	11/25/2020	\$552.05	11.27.2020	
Regular	Finalized	55282	11/25/2020	\$847.86	11.30.2020	
Regular	Finalized	55283	11/25/2020	\$413.28	11.25.2020	
Regular	Finalized	55284	11/25/2020	\$540.37	11.27.2020	
Regular	Finalized	55285	11/25/2020	\$739.71	11.27.2020	
Regular	Finalized	55286	11/25/2020	\$938.87	11.27.2020	
				\$14,591.06		

Payroll paid by SMC on behalf of Ocean Shores 11/1/2020 - 11/11/2020
*****to be reimbursed by US Bank DIP account 4035 Ocean Shores**

Purpose	Amount
Payroll	43,468.23
Withholding	-
Payroll Taxes	5,369.15
Total due to Nampa Suites	48,837.38

paid using US Bank check: 1001



GRAVITY PAYMENTS
5601 22ND AVE NW 200 SEATTLE, WA 98107

YOUR CARD PROCESSING STATEMENT

140685/000001/940398/STMT/40685/0000/266933 000 01 000000
SHILO INN, OCEAN SHORES, LLC
11707 NE AIRPORT WAY
PORTLAND OR 97220-1075

Page 1 of 7

THIS IS NOT A BILL

Statement Period	11/01/20 - 11/30/20
Merchant Number	28788
Customer Service	1-877-388-5906

Location:

SHILO INN OCEAN SHORES
707 OCEAN SHORES BLVD NW
OCEAN SHORES WA 98569-9345

SUMMARY

An overview of account activity for the statement period.

Page 4	Amounts Submitted	\$101,141.10
Page 4	Third Party Transactions	0.00
Page 4	Adjustments/Chargebacks	-\$190.74
Page 4	Fees Charged	-\$2,423.91

Total Amount Funded to Your Bank	\$98,526.45
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See page 2 for Key Definition of Terms

(Amount Submitted - Third Party) + Adjustments + Chargebacks + Fees Charged = Amount Funded

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Key Card Processing Terms in Plain Language

Total Amount You Submitted - The total dollar amount of card transactions submitted and processed during the Statement Period.

Third-Party Transactions - These are transactions that are passed directly to third party service providers for processing and/or funding.

Chargebacks - Those transactions that are challenged or disputed by a cardholder or card-issuing bank. A Chargeback equals the transaction amount that is disputed by the cardholder or card-issuing bank.

Adjustments - The amounts credited to, or deducted from, your account to resolve processing and billing discrepancies.

Interchange Charges - These are the variable fees charged by Card Organizations for processing transactions. Factors that affect Interchange Charges include card type, information contained in the transaction, and how/when the transaction was processed.

Total Amount Funded to Your Bank - The total dollar amount of credited/paid to your account during the Statement Period.

Merchant Number - The unique account number assigned to every merchant and merchant location. You'll find it at the top of your statement.

Fees Charged - Total processing fees calculated and charged to your bank account for the statement month.

YOUR CARD PROCESSING STATEMENT

Merchant Number 28788
Customer Service 1-877-388-5906

Page 3 of 7

Statement Period 11/01/20 - 11/30/20

SUMMARY BY CARD TYPE

(Total Sales You Submitted - Refunds = Total Amount You Submitted)

Card Type	Average Ticket	Total Gross Sales You Submitted		Refunds		Total Amount You Submitted
		Items	Amount	Items	Amount	Amount
MASTERCARD	\$681.92	257	\$36,427.97	21	\$2,678.39	\$160,933.29
VISA	\$156.13	276	\$41,509.50	37	\$4,075.72	\$37,314.00
VISA DEBIT	\$146.29	221	\$31,238.40	23	\$2,272.47	\$28,965.93
DISCOVER ACQ	\$110.20	10	\$1,062.37	1	\$70.56	\$991.81
Total		764	\$110,238.24	82	\$9,097.14	\$228,205.03

AMOUNTS FUNDED BY BATCH

(Amount Submitted - Third Party) + Adjustments + Chargebacks + Fees Charged = Amount Funded

Date Submitted	Batch Number	Submitted Amount	Third Party Transactions	Adjustments/ Chargebacks	Fees Charged	Funded Amount
09/11/20	112020MOADJ	0.00	0.00	-\$261.07	0.00	-\$261.07
09/30/20	110520MOADJ	0.00	0.00	-\$70.96	0.00	-\$70.96
11/02/20	98030741272	\$2,932.18	0.00	0.00	0.00	\$2,932.18
11/02/20	98030741273	\$3,218.89	0.00	0.00	0.00	\$3,218.89
11/03/20	98030841476	\$2,918.39	0.00	0.00	0.00	\$2,918.39
11/04/20	98030941677	\$2,584.43	0.00	0.00	0.00	\$2,584.43
11/05/20	98031041663	\$1,941.32	0.00	0.00	0.00	\$1,941.32
11/06/20	98031141739	\$5,546.93	0.00	0.00	0.00	\$5,546.93
11/06/20	110620MOADJ	0.00	0.00	\$141.29	0.00	\$141.29
11/08/20	98031341289	\$3,245.09	0.00	0.00	0.00	\$3,245.09
11/08/20	98031341290	\$8,557.56	0.00	0.00	0.00	\$8,557.56
11/09/20	98031441978	\$3,347.89	0.00	0.00	0.00	\$3,347.89
11/10/20	98031541527	\$146.48	0.00	0.00	0.00	\$146.48
11/11/20	98031641686	\$3,037.11	0.00	0.00	0.00	\$3,037.11
11/12/20	98031741594	\$2,829.31	0.00	0.00	0.00	\$2,829.31
11/13/20	98031841660	\$6,575.54	0.00	0.00	0.00	\$6,575.54
11/15/20	98032041240	\$8,595.83	0.00	0.00	0.00	\$8,595.83
11/15/20	98032041241	\$3,296.45	0.00	0.00	0.00	\$3,296.45
11/16/20	98032141017	\$2,229.90	0.00	0.00	0.00	\$2,229.90
11/17/20	98032241451	\$1,519.44	0.00	0.00	0.00	\$1,519.44
11/18/20	98032341602	-\$137.28	0.00	0.00	0.00	-\$137.28
11/19/20	98032441658	\$2,240.96	0.00	0.00	0.00	\$2,240.96
11/20/20	98032541618	\$3,915.25	0.00	0.00	0.00	\$3,915.25
11/22/20	98032741286	\$4,341.05	0.00	0.00	0.00	\$4,341.05
11/22/20	98032741287	\$2,718.94	0.00	0.00	0.00	\$2,718.94
11/23/20	98032841861	\$2,081.21	0.00	0.00	0.00	\$2,081.21
11/24/20	98032941455	\$585.40	0.00	0.00	0.00	\$585.40
11/25/20	98033041693	\$2,042.47	0.00	0.00	0.00	\$2,042.47
11/26/20	98033141507	\$5,193.26	0.00	0.00	0.00	\$5,193.26
11/27/20	98033241343	\$4,328.71	0.00	0.00	0.00	\$4,328.71
11/29/20	98033441200	\$2,749.11	0.00	0.00	0.00	\$2,749.11
11/29/20	98033441201	\$7,188.83	0.00	0.00	0.00	\$7,188.83
11/30/20	98033541982	\$1,370.45	0.00	0.00	0.00	\$1,370.45
	Month End Charge	0.00	0.00	0.00	-\$2,423.91	-\$2,423.91
Total		\$101,141.10	0.00	-\$190.74	-\$2,423.91	\$98,526.45

YOUR CARD PROCESSING STATEMENT

Merchant Number 28788
Customer Service 1-877-388-5906

Page 4 of 7

Statement Period 11/01/20 - 11/30/20

AMOUNTS SUBMITTED

Date Submitted	MASTERCARD	VISA	VISA DEBIT	DISCOVER ACQ	Total Submitted
11/30/20	\$160,933.29	\$37,314.00	\$28,965.93	\$991.81	\$228,205.03
Sub Totals	\$160,933.29	\$37,314.00	\$28,965.93	\$991.81	\$228,205.03
Total					\$228,205.03

THIRD PARTY TRANSACTIONS

Date	Description	Amount
	No Third Party Transactions for this Statement Period	
Total		0.00

ADJUSTMENTS/CHARGEBACKS

Date	Description	Amount
09/11/20	ADJUSTMENT	-261.07
09/30/20	ADJUSTMENT	-70.96
11/06/20	ADJUSTMENT	141.29
	Total Adjustment	-190.74
Total		-\$190.74

FEES CHARGED

Date	Type	Description	Volume	Rate	Total
11/30/20	CF	MASTERCARD			
11/30/20	CF	DISC 1			0.00
11/30/20	CF	DUES & ASSESSMENTS			-47.35
11/30/20	CF	AUTHS & AVS			
11/30/20	CF	CPU GTWY	319	0.0700	-22.33
11/30/20	CF	INTERCHANGE			-656.28
11/30/20	CF	NABU FEES	328	0.01950	-6.40
11/30/20	CF	ACQ SUPPORT FEE	1426.88	0.00850	-12.13
11/30/20	CF	CROSS BORDER FEE	1426.88	0.00599	-8.55
11/30/20	CF	MC DISPUTE IMAGE FEE	1	0.20000	-0.20
11/30/20	CF	MC DISPUTE CASE FEE	1	1.35000	-1.35
11/30/20	CF	PROCSNG INTGRITY IMAGE FEE	12	0.01500	-0.18
11/30/20	CF	MC KILOBYTE FEE	256	0.00350	-0.90
11/30/20	CF	LOCATION FEE			-1.25
11/30/20	CF	PRCSNG INTGRITY FNATHV FEE			-5.78
11/30/20	CF	VISA			
11/30/20	CF	DISC 1			0.00
11/30/20	CF	AUTHS & AVS			
11/30/20	CF	CPU GTWY	350	0.0700	-24.50
11/30/20	CF	INTERCHANGE			-1142.12
11/30/20	CF	ACQR PROCESSOR FEES	350	0.01950	-6.83
11/30/20	CF	MISUSE AUTH FEES	39	0.09000	-3.51
11/30/20	CF	TRAN INTEGRITY FEE	249	0.10000	-24.90

YOUR CARD PROCESSING STATEMENT

Merchant Number 28788
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Statement Period 11/01/20 - 11/30/20

FEES CHARGED

Date	Type	Description	Volume	Rate	Total
11/30/20	CF	FIXED NETWORK CP FEE	1A		-2.90
11/30/20	CF	ACQ DATA PROC RTN C			-0.72
11/30/20	CF	CR DUES AND ASSESS	41509.50	0.00140	-58.11
11/30/20	CF	FILE TRANSMISSION FEE			-1.01
11/30/20	CF	INTRNTL ACQ PROC FEE CR			-0.04
		VS OFLN DB			
11/30/20	CF	DISC 1			0.00
		AUTHS & AVS			
11/30/20	CF	CPU GTWY	284	0.0700	-19.88
11/30/20	CF	INTERCHANGE			-251.84
11/30/20	CF	ACQR PROCESSOR FEES	284	0.01550	-4.40
11/30/20	CF	TRAN INTEGRITY FEE	199	0.10000	-19.90
11/30/20	CF	ACQ DATA PROC RTN D			-0.36
11/30/20	CF	DB DUES AND ASSESS	31238.40	0.00130	-40.61
		DCVR ACQ			
11/30/20	CF	DISC 1			0.00
11/30/20	CF	DUES & ASSESSMENTS			-1.38
		AUTHS & AVS			
11/30/20	CF	CPU GTWY	10	0.0700	-0.70
11/30/20	CF	INTERCHANGE			-22.24
11/30/20	CF	DSCV DATA USAGE FEE	11	0.01950	-0.21
11/30/20	CF	DSCV AUTH FEE	11	0.00181	-0.02
11/30/20	CF	DISC NETWORK AUTH FEE	11	0.00250	-0.03
		Total Card Fees			-2388.91
11/30/20	MISC	CHARGEBACKS	2	15.000	-30.00
11/30/20	MISC	12B LETTERS	1	5.000	-5.00
		Total Miscellaneous Fees			-35.00
Total (Miscellaneous Fees and Card Fees)					-\$2,423.91

Fee Type Legend

MISC = Miscellaneous Fees
CF = Card Fees

INTERCHANGE CHARGES

Product/Description	Sales Total	Number of Transactions	Interchange Cost Rate	Cost Per Transaction	Sub Total	Total Interchange Charges
MASTERCARD						
WORLD CARD T&E	1,371.45	9	0.0230	0.10	-32.44	
MCTIPLDGG	2,511.58	16	0.0158	0.10	-41.27	
CREDIT REFUND 1	-262.36	2	0.0242	0.00	6.34	
CREDIT REFUND 5	-222.36	3	0.0173	0.00	3.85	
CORP REFUND 2	-768.07	7	0.0230	0.00	17.68	
WCELITE T&E	2,416.33	17	0.0275	0.10	-68.15	
ENHANCED TVLIND	1,993.33	14	0.0180	0.10	-37.28	

YOUR CARD PROCESSING STATEMENT

Merchant Number :8788
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Statement Period 11/01/20 - 11/30/20

INTERCHANGE CHARGES					Interchange Cost			Total Interchange Charges
Product/Description	Sales Total	Number of Transactions	Rate	Cost Per Transaction	Sub Total			
MASTERCARD								
COFLEETPURCTEII	13,686.54	111	0.0265	0.10	-373.78			
HIGHVAL TRV ENT	524.94	4	0.0275	0.10	-14.84			
CORPCRDTEII	747.26	4	0.0265	0.10	-20.20			
COMM BUS2BUS IL	1,426.88	4	0.0200	0.00	-28.53			
MASTERCARD TOTAL	23,425.52	191				-588.62		
MASTERCARD DEBIT								
MC TIP DEBIT	1,607.96	13	0.0115	0.15	-20.43			
DEBIT REFUND 3	-104.72	1	0.0000	0.00	0.00			
REGREFUND USFA	-1,320.88	8	0.0000	0.00	0.00			
REGULATEDDBTCN	214.36	1	0.0005	0.21	-0.32			
REGULATEDFDBTCN	9,927.34	64	0.0005	0.22	-19.04			
MASTERCARD DEBIT TOTAL	10,324.06	87				-39.79		
VISA								
NON QUAL BUS CR	635.32	4	0.0295	0.20	-19.54			
VISAVINTRAVLCR	417.30	2	0.0230	0.10	-9.79			
DOMESTIC STD NQ	37,577.97	249	0.0270	0.10	-1,039.50			
PSIRF T&E CRED	345.89	4	0.0154	0.10	-5.72			
US CRDT VCR-CN	-3,911.52	35	0.0176	0.00	68.84			
US CRDT VCR-CM	-164.20	2	0.0235	0.00	3.85			
US BUS TR1 ELEC	333.96	2	0.0240	0.10	-8.21			
US VSP ELEC	991.87	6	0.0240	0.10	-24.40			
US BUS TR2 ELEC	940.63	7	0.0275	0.15	-26.91			
US BUS TR3 ELEC	266.56	2	0.0285	0.20	-7.99			
VISA TOTAL	37,433.78	313				-1,069.37		
VISA DEBIT								
CPS HTLCRCPR DB	722.74	5	0.0119	0.10	-9.10			
EIRF DB	9,688.73	73	0.0175	0.20	-184.15			
US CV DB	-2,272.47	-23	0.0000	0.00	0.00			
EIRF PP	596.48	4	0.0180	0.20	-11.53			
USREGULATEDAIRF	18,082.89	122	0.0005	0.22	-35.88			
REG HTL CAR CP	988.54	8	0.0005	0.22	-2.25			
US BUS CP DB	414.79	4	0.0170	0.10	-7.45			
REG BUS CP DB	744.23	5	0.0005	0.22	-1.47			
VISA DEBIT TOTAL	28,965.93	198				-251.83		

YOUR CARD PROCESSING STATEMENT

Merchant Number 8788
Customer Service 1-877-388-5906

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Statement Period 11/01/20 - 11/30/20

INTERCHANGE CHARGES				Interchange Cost			Total Interchange Charges
Product/Description	Sales Total	Number of Transactions	Rate	Cost Per Transaction	Sub Total		
DISCOVER ACQ P HTCRRW	799.51	8	0.0190	0.10	-15.99		
CMRCL EL	262.86	2	0.0230	0.10	-6.25		
ADJVR3RW	-70.56	-1	0.0175	0.00	1.23		
DISCOVER ACQ TOTAL	991.81	9				-21.01	
Total	101,141.10	798				-1,970.62	

TAX GROSS REPORTABLE SALES BY TIN

Total dollar amount of aggregate reportable payment card transactions funded and third party network transactions, for each participating payee, without regard to any adjustments for credits, cash equivalents, discount amount, fees, refunded amounts, or any other amounts per respective tax identification number.

Month	Description	Total
NOV	Gross Reportable Sales - TIN XXXXX2145	\$110,238.24
	2020 YTD Gross Reportable Sales	\$2,313,200.05

UST-14, SUMMARY OF DISBURSEMENTS (cont'd.)**Payments on Pre-Petition Unsecured Debt** (requires court approval)

Did the debtor, or another party on behalf of the debtor, make any payments during this reporting month on pre-petition unsecured debt? Yes ☐ No ☐ If Yes, list each payment.

Payee name	Nature of payment	Payment date	Payment amount	Date of court approval

Payments to Attorneys and Other Professionals (requires court approval)

Did the debtor, or another party on behalf of the debtor, make any payments during this reporting month to a professional such as an attorney, accountant, realtor, appraiser, auctioneer, business consultant, or other professional person? Yes ☐ No ☐ If Yes, list each payment.

Professional name	Type of work performed	Payment date	Payment amount	Date of court approval

Payments to an Officer, Director, Partner, or Other Insider of The Debtor

Did the debtor, or another party on behalf of the debtor, make any payments during this reporting month to an officer, director, partner, or other insider of the debtor? Yes ☐ No ☐ If Yes, list each payment.

Payee name	Relationship to debtor	Payment date	Payment amount	Purpose of payment

INSTRUCTIONS: Use the last column to describe the purpose of each payment, such as gross wages or salary, reimbursement for business expenses, loan repayment, advance, draw, bonus, dividend, stock distribution, or other reason for the payment (explain).

UST-15, STATEMENT OF AGED RECEIVABLES

INSTRUCTIONS: Complete all portions of UST-15, STATEMENT OF AGED RECEIVABLES, unless the debtor asserts the following two statements are true for this reporting month:

- 1) At the beginning of the reporting month, the debtor did not have any uncollected receivables from prior months which includes both pre-petition and post-petition accounts receivable; and,
- 2) During the reporting month, the debtor did not have any receivables activity, including the accrual of new accounts receivable, or the collection or writeoff of accounts receivable from prior months.

Check here ☐ if the debtor asserts that both statements are correct and skip to UST-16, STATEMENT OF POST-PETITION PAYABLES, on the next page.

Accounts Receivable Aging

	Balance at month end	Current portion	Past due 31-60 days	Past due 61-90 days	Past due over 90 days	Uncollectible receivables
Pre-petition receivables	5,813.82	0.00	616.00	3,151.68	2,046.14	0.00
Post-petition receivables	409.92	0.00	273.28	136.64	0.00	0.00
TOTALS	6,223.74	0.00	889.28	3,288.32	2,046.14	0.00

Explain what efforts the debtor made during this reporting month to collect receivables over 60 days past due.

Does the debtor have any accounts receivable due from an officer, director, partner, or other insider of the debtor?
If yes, explain.

Accounts Receivable Reconciliation

Closing balance from prior month	8,626.10
New accounts receivable added this month	0.00
Subtotal	8,626.10
Less accounts receivable collected	(2,402.36)
Closing balance for current month	6,223.74

**UST-16, STATEMENT OF POST-PETITION PAYABLES
PART A - TAXES**

INSTRUCTIONS: Complete both pages of PART A - TAXES unless the debtor asserts the following statement is true for this reporting month:

At the end of this reporting month, the debtor did not have any unpaid post-petition taxes which includes both current and delinquent tax obligations.

Check here ☐ if the debtor asserts the statement is correct, and skip to PART B - OTHER PAYABLES on Page 10.

Reconciliation of Unpaid Post-Petition Taxes

Type of tax	(1) Unpaid post-petition taxes from prior reporting month	(2) Post-petition taxes accrued this month (new obligations)	(3) Post-petition tax payments made this reporting month	(4) Unpaid post-petition taxes at end of reporting month (Column 1+2-3 = 4)
Federal Taxes				
Employee withholding taxes		3,492.86	3,492.86	0.00
FICA/Medicare--Employee		607.19	607.19	0.00
FICA/Medicare--Employer	1,638.46	607.19	0.00	2,246.65
Unemployment	29.52	38.50	0.00	68.02
State Taxes				
Dept. of Revenue				
Dept. of Labor & Industries	1,104	1,725	0.00	2,547.26
Empl. Security Dept.	741.07	1,443.26	0.00	2,184.33
Other Taxes				
Local city/county				
Gambling				
Personal property				
Real property				
Other: Washington Excise	21,739.49	12,602.94	21,739.49	12,602.94
Total Unpaid Post-Petition Taxes				\$ 19,649.20

Debtor Shilo Inn, Ocean Shores, LLC

Case Number

20-42348-BDL

Month Ending

November 2020

**UST-16, STATEMENT OF POST-PETITION PAYABLES
PART A - TAXES (cont'd.)**

Delinquent Tax Reports and Tax Payments (post-petition only)

Taxing agency	Tax reporting period	Report due date	Payment due date	Amount due
none				

Explain the reason for any delinquent tax reports or tax payments:

**UST-16, STATEMENT OF POST-PETITION PAYABLES
PART B - OTHER PAYABLES**

INSTRUCTIONS: Complete both pages of PART B - OTHER PAYABLES unless the debtor asserts that this statement is true for this reporting month:

Except for taxes and professional fees disclosed in PART A and PART C of this report, respectively, the debtor has no other unpaid post-petition payables from the current reporting month, or from any prior reporting months.

Check here ☐ if the debtor asserts the statement is correct, and skip to PART C - ESTIMATED PROFESSIONAL FEES on Page 12.

Reconciliation of Post-Petition Payables (excluding taxes and professional fees)

Closing balance from prior month 10/16/2020 - 10/31/2020	24,061.39
New payables added this month	118,818.36
Subtotal	142,880.36
Less payments made this month	(80,830.96)
Closing balance for this reporting month	\$ 62,049.40

Breakdown of Closing Balance by Age

Current portion	28,829.88
Past due 1-30 days	33,219.52
Past due 31-60 days	
Past due 61-90 days	
Past due over 90 days	
Total	\$ 62,049.40

For accounts payable more than 30 days past due, explain why payment has not been made:

Debtor Shilo Inn, Ocean Shores, LLC

Case Number

20-42348-BDL

Month Ending

November 2020

**UST-16, STATEMENT OF POST-PETITION PAYABLES
PART C - ESTIMATED PROFESSIONAL FEES**

INSTRUCTIONS: Report only post-petition professional fees and expenses. To the extent possible, use billing statements to report the actual amounts due. If billing statements are not available, use the best information available to estimate the fees and costs.

Type of professional	Amount of retainer (if applicable)	Fees and expenses from prior months	Fees and expenses added this month	Total estimated fees and expenses at month end
Debtor's counsel				
Debtor's accountant				
Debtor's other professional (explain)				
Trustee's counsel				
Creditors' Committee Counsel				
Creditors' Committee other professional (explain)				
Total estimated post-petition professional fees and costs				\$

Debtor

Shilo Inn, Ocean Shores, LLC

Case Number

20-42348-BDL

Month Ending

November 2020

UST-17, OTHER INFORMATION

INSTRUCTIONS: Answer each question fully and attach additional sheets if necessary to provide a complete response.

Yes**No**

Question 1 - Sale or Abandonment of the Debtor's Assets. Did the debtor, or another party on behalf of the debtor, sell, transfer, or otherwise dispose of any of the debtor's assets during the reporting month? Include only sales out of the ordinary course. *The debtor must attach an escrow statement for each sale of real property and an auctioneer's report for each auction.*

☐☐

<u>Asset Description</u>	<u>Date of Court Approval</u>	<u>Method of Disposition</u>	<u>Gross Sales Price</u>	<u>Net Proceeds Received (& Date)</u>	<u>Escrow Statement or Auctioneer's Report Attached?</u>
--------------------------	-------------------------------	------------------------------	--------------------------	---	--

1.

2.

3.

4.

5.

Total _____

Any disbursements made from escrow or trust accounts from the proceeds of the above transactions should also be included on the line of UST-14 entitled "Disbursements from sales out of the ordinary course."

Question 2 - Financing. During the reporting month, did the debtor receive any funds from an outside funding source?

☐☐Date of Court Approval
Amount
funds
Received
Source of
Date

Total _____

Question 3 - Insider Loans/Capital Contributions. During the reporting month, did the debtor receive any funds from an officer, director, partner, or other insider of the debtor?

☐☐Date of Court Approval
Amount
funds
Received
Source of
Date

Total _____

UST-17, OTHER INFORMATION

		Yes	No
Question 4 - Insurance and Bond Coverage. Did the debtor renew, modify, or replace any insurance policies during this reporting month?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Renewals: <u>Provider</u>	<u>New Premium</u>	<u>Is a Copy Attached to this Report?</u>	
Changes: <u>Provider</u>	<u>New Premium</u>	<u>Is a Copy Attached to this Report?</u>	
Were any insurance policies canceled or otherwise terminated for any reason during the reporting month? If yes, explain.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Were any claims made during this reporting month against the debtor's bond? Answer No if the debtor is not required to have a bond. If yes, explain.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Question 5 - Personnel Changes. Complete the following:			
	Full-time	Part-time	
Number of employees at beginning of month	17	4	
Employees added	3	0	
Employees resigned/terminated	1	0	
Number employees at end of month	19	4	
Gross Monthly Payroll and Taxes		\$ 21,417.56	
Question 6 - Significant Events. Explain any significant new developments during the reporting month.			
Question 7 - Case Progress. Explain what progress the debtor made during the reporting month toward confirmation of a plan of reorganization.			